

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)
31640-134353



In re Application of David KLATZMANN et al.

Application Number 08/983,474

Filed June 30, 1998

For α - β C4BP-TYPE RECOMBANANT HETEROMULTIMERIC PROTEINS

Group Art Unit
1646

Examiner
Prema Maria MERTZ

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows
(check time period desired):

- ☒ One month (37 CFR 1.17(a)(1)) \$120.00
☐ Two months (37 CFR 1.17(a)(2)) \$_____
☐ Three months (37 CFR 1.17(a)(3)) \$_____
☐ Four months (37 CFR 1.17(a)(4)) \$_____
☐ Five months (37 CFR 1.17(a)(5)) \$_____
☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.
☐ A check in the amount of the fee is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.
☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 22-0261.
I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record.

☐ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a). 44,014.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

January 27, 2006

Date

Nancy Axelrod

Signature

01/30/2006 JADD01 00000130 220261 08983474

Nancy J. Axelrod, Reg. No. 44,014

01 FC:1251 120.00 DA

Typed or printed name

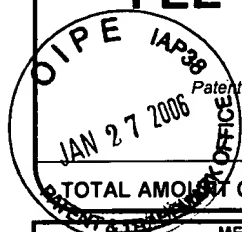
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 forms are submitted.

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ATTORNEYS AT LAW

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.
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FEE TRANSMITTAL



Complete If Known

Application Number	08/983,474
Filing Date	June 30, 1998
First Named Inventor	David KLATZMANN
Examiner Name	Prema Maria MERTZ
Group / Art Unit	1646
Attorney Docket No.	31640-134353

TOTAL AMOUNT OF PAYMENT (\$) 120.00

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit
Account
Number

22-0261

Deposit
Account
Name

Venable LLP

- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ Payment Enclosed:

☐ Check ☐ Credit card ☐ Money Order ☒ Other Deposit Account

FEE CALCULATION

1. BASIC FILING FEE

Large Fee Code	Entity Fee(\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
1011	300	2011	150	Utility filing fee	
1012	200	2012	100	Design filing fee	
1013	200	2013	100	Plant filing fee	
1014	300	2014	150	Reissue filing fee	
1005	200	2005	100	Provisional filing fee	
1081	250	2081	125	Utility App. Size Fee	
1082	250	2082	125	Design App Size Fee	
1083	250	2083	125	Plant App. Size Fee	
1084	250	2084	125	Reissue App Size Fee	
1085	250	2085	125	Prov. App Size Fee	

SUBTOTAL (1)

(\$0)

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
-20 ** =	X	=	
Independent Claims -3** =	X	=	
Multiple Dependent	X	=	

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	360	2204	180	Multiple dependent claim, if not paid
1204	200	2204	100	** Reissue independent claims in excess of three
1205	50	2205	25	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)

(\$)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Fee Code	Lrg Ent Fee (\$)	Fee Code	Sm Ent Fee (\$)	Fee Description	Fee Paid
1111	500	2111	250	Utility Search Fee	
1112	100	2112	50	Design Search Fee	
1113	300	2113	150	Plant Search Fee	
1114	500	2114	250	Reissue Search Fee	
1311	200	2311	100	Utility Examination Fee	
1312	130	2312	65	Design Examination Fee	
1313	160	2313	80	Plant Examination Fee	
1314	600	2314	300	Reissue Examination Fee	
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	120	2215	60	Extension for reply within first month	120.00
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,590	2254	795	Extension for reply within fourth month	
1255	2,160	2255	1080	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	500	2452	250	Petition to revive - unavoidable	
1453	1,500	2453	750	Petition to revive - unintentional	
1501	1,400	2501	700	Utility issue fee (or reissue)	
1502	800	2502	400	Design issue fee	
1503	1,100	2503	550	Plant issue fee	
1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	790	2809	395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	790	2801	395	Request for Continued Examination (RCE)	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

\$120.00

SUBMITTED BY Complete (if applicable)

Name (Print/Type)	Nancy J. Axelrod	Reg No. Attorney/Agent)	44,014	Telephone	202-344-4000
Signature	Nancy Axelrod	Date	January 27, 2006		

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ATTORNEYS AT LAW

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